**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 5 pgs &amp; 6 refers

Application Number	10/679,913
Filing Date	October 6, 2003
First Named Inventor	James Ronald Lawter
Art Unit	Unknown
Examiner Name	Not Yet Assigned
Attorney Docket No.	ORA5005USANP (J&JO-105US)

**ENCLOSURES (Check all that apply)**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/Declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><br><input type="checkbox"/> Response to Missing Parts under<br>37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation,<br>Change of Correspondence<br>Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication<br>to Group<br><br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply<br>Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>identify below): 6 references;<br>Post Card |
|---|--|---|

**Remarks:****SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm or Individual Name	Robert L. Anderson	Registration No. (Attorney/Agent)	25,771
Signature			
Date	March 5, 2004		

**CERTIFICATE OF TRANSMISSION / MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

Typed or printed name	Patricia C. Boccella	Date	March 5, 2004
Signature			

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appln. No: 10,679,913  
Applicant: James Ronald Lawter  
Filed: October 6, 2003  
Title: MUCOADHESIVE TETRACYCLINE FORMULATIONS  
TC/A.U.: Unknown  
Examiner: Unknown

**INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents  
P.O. Box 1450  
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Sir:

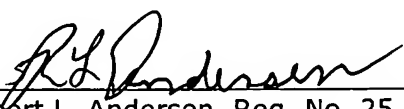
Pursuant to 37 C.F.R. §§ 1.97 and 1.98 and to the duty of disclosure set forth in 37 C.F.R. § 1.56, the Examiner in charge of the above-identified application is requested to consider and make of record the references listed on the PTO 1449 (RP) submitted herewith. A copy of each of the listed references is also enclosed.

Although the information submitted herewith may be "material" to the Examiner's consideration of the subject application, this submission is not intended to constitute an admission that such information is "prior art" as to the claimed invention.

In accordance with 37 C.F.R. § 1.97(g), the filing of this Information Disclosure Statement shall not be construed to mean that a search has been made.

This Information Disclosure Statement is being filed within three months of the filing date of the above-referenced application or before mailing of the first Official Action. No first Official Action has yet been received and it is presumed that none has yet been mailed. No fee or statement is required. 37 C.F.R. § 1.97(b).

Respectfully submitted,

  
Robert L. Andersen, Reg. No. 25,771  
Attorney for Applicant

RLA/pb

Enclosures: PTO Form 1449  
(6) References  
Transmittal Form

Dated: March 5, 2004

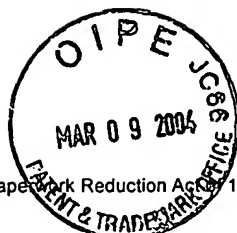
☒ P.O. Box 980  
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(610) 407-0700

☐ P.O. Box 1596  
Wilmington, DE 19899  
(302) 778-2500

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PTO/SB/08b (08-03) (AW 10/2003)  
Approved for use through 6/30/2006. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Substitute for Form 1449A/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

SHEET 1 of 2

### Complete if Known

Application Number	10/679,913
Filing Date	October 6, 2003
First Named	James Ronald Lawter
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket No.	ORA5005USANP(J&JO-105US)

### U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date (MM-DD-YYYY)	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code <sup>2</sup> (If known)			
		US-6,025,326	02-15-2000	Steinberg et al.	
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			

### FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date (MM-DD-YYYY)	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup> - Number <sup>4</sup> - Kind Code <sup>5</sup> (If known)				
		WO 99/45910	09-16-1999	Sonis et al.		<input type="checkbox"/>
		WO 01/19362	03-22-2001	Lawter et al.		<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

Examiner Signature	Date Considered
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.

<sup>1</sup>Applicant's unique citation designation number (optional).

<sup>2</sup>See Kind Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04.

<sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard St.3).

<sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document.

<sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible.

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Approved for use through 6/30/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Substitute for Form 04493870

*(Use as many sheets as necessary)*

**Complete if Known**

Application Number	10,679,913
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<b>Filing Date</b>	<b>October 6, 2003</b>
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First Named Inventor	James Ronald Lawter
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Art Unit	Unknown
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Examiner Name	Unknown
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**SHEET 2 of 2**

Attorney Docket No. ORA5005USANP(J&JO-105US)

## NON-PATENT LITERATURE DOCUMENTS

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.

<sup>1</sup>Applicant's unique citation designation number (optional).

<sup>2</sup>Applicant is to place a check mark here if English language translation is attached.

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